FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

gton, D.C. 20549	OME
-	

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average b	urden								

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Moore Elizabeth D					2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ ED ]									k all applicat Director Officer (g	10% Owner give title Other (specif		wner	
		est) DISON, INC. C/ UITE 1618-S	(Middle) O SECRET	ARY	3. Date of Earliest Transaction (Month/Day/Year) 02/18/2015									SVP & General Counsel				
(Street) NEW YOL			10003		4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(518		(Zip)	n-Deriv	/ativ	- Sc	curitic	as Acc	uirad	Die	nosed of	f or Ren	eficially (	Owned				
1. Title of Security (Instr. 3) 2. Tra		2. Trans Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		I (A) or	5. Amount Securities Beneficiall Owned Fo	y (D	Ownership rm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an			(Instr. 4)		
Common Stock 02/1				02/18	3/2015		M		9,649	A	(1)	35,75	4.27	D				
Common Stock 02,			02/18	.8/2015				D		1,930 D		\$63.82	33,824.27		D			
			Table II -								osed of, onvertib			wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion Or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)  3. Transaction Execution Date, if any (Month/Day/Year)  4. Transaction Execution Date, if any (Month/Day/Year)  8)					6. Date Exercisable and Expiration Date (Month/Day/Year)		e	7. Title and Amou of Securities Underlying Deriva Security (Instr. 3 a		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)				
				c	ode '	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(5)		
Performance Units (Phantom Stock)	(2)	02/18/2015			A		13,700		(3)		(3)	Common Stock	13,700(4)	(1)	13,700 <sup>(4)</sup>	D		
Performance Restricted Stock Units	(2)	02/18/2015			М			9,649	02/18/20	)15	02/18/2015	Common Stock	9,649(5)	(1)	0	D		

## **Explanation of Responses:**

1. Not applicable.

Stock)

- 2. Each Performance Unit and Performance Restricted Stock Unit is the economic equivalent of one share of Company common stock.
- 3. Performance Units granted under the Company's Long Term Incentive Plan ("LTIP"), will vest in 2018 when they are determined and awarded by the Management Development and Compensation Committee of the Company's Board of Directors.
- 4. The number of shares (or cash equivalents) will be adjusted based on certain performance criteria, including criteria other than the market price, as specified under the LTIP.
- 5. The number of shares (or cash equivalents) were adjusted based on certain performance criteria, including criteria other than the market price, as specified under the LTIP.

## Remarks:

02/20/2015 Carole Sobin; Attorney-in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.